AUTHORIZATION TO ONEW WISCON	CANCEL REGISTI ISIN RESIDENTS	RATION
(Name of person authorizing	cancellation of voter r	egistration)
It is my intent to vote for President and Vice I	President in Wiscons	in, under §.6.15, Wis. Stats.
I authorize the cancellation of my vo	oting privileges at the	e following address:
(Former stree	t address)	
(Town, Village, or City)	(State)	(Zip Code)
I am not registered to vote at my pro	evious address.	
Date		
(Si _t	gnature of new Wiscon	sin resident)
	(Present Addres	s)
GAB-139 (Rev.4/92) (Ref. 1/98) §.6.15(2)(b), Stats.		

AUTHORIZATION TO CANCEL REGISTRATION NEW WISCONSIN RESIDENTS			
(Name of person authorizing c	ancellation of voter r	registration)	
my intent to vote for President and Vice Pr	esident in Wiscons	sin, under §.6.15, Wis.	
I authorize the cancellation of my vot	ing privileges at the	e following address:	
(Former street	address)		
(Town, Village, or City)	(State)	(Zip Code)	
I am not registered to vote at my prev	vious address.		
Date	, C W		
(Sign	nature of new Wiscon	sin resident)	
	(Present Addres		